#### PHA Plans

## Clay County Housing & Redevelopment Authority

5 Year Plan for Fiscal Years 2000 - 2005 Annual Plan for Fiscal Year 2001

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

#### PHA Plan Agency Identification

| PHA Name: Clay County Housing & Redevelopment Authority  |
|--|
| PHA Number: MN-164   |
| PHA Fiscal Year Beginning: 01/2001   |
| Public Access to Information   |
| Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)  ☐ Main administrative office of the PHA ☐ PHA development management offices ☐ PHA local offices  |
| <b>Display Locations For PHA Plans and Supporting Documents</b>  |
| The PHA Plans (including attachments) are available for public inspection at: (select all that apply)  Main administrative office of the PHA PHA development management offices PHA local offices Main administrative office of the local government Main administrative office of the County government Main administrative office of the State government Public library (Moorhead Public Library, Moorhead, Minnesota) PHA website Other (list below) |
| PHA Plan Supporting Documents are available for inspection at: (select all that apply)  Main business office of the PHA  PHA development management offices  Other (list below)  |

#### 5-YEAR PLAN PHA FISCAL YEARS 2000 - 2004

[24 CFR Part 903.5]

| A. Mission   |
|--|
| State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)   |
| The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.  |
| The PHA's mission is: (state mission here)   |
| It is the mission of the Clay County Housing & Redevelopment Authority to assist low income families with decent, safe and affordable housing opportunities as they strive to achieve self-sufficiency and improve the quality of their lives. The Clay County Housing & Redevelopment Authority is committed to operating in an efficient, ethical and professional manner and will create and maintain partnerships with its clients and appropriate community agencies in order to accomplish this mission.  B. Goals   |
| The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, PHAS ARE STRONGLY ENCOURAGEDTO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS. (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives. |
| HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.   |
| <ul> <li>PHA Goal: Expand the supply of assisted housing</li> <li>Objectives:</li> <li></li></ul>  |

Acquire or build units or developments

opportunities:

Other (list below)

| $\boxtimes$ | PHA Goal: Improve the quality of assisted housing   |
|-------------|---|
|             | Objectives:   |
|             | (list; e.g., public housing finance; voucher unit inspections)  |
|             | Renovate or modernize public housing units:   |
|             | Demolish or dispose of obsolete public housing:   |
|             | Provide replacement public housing:   |
|             | Provide replacement vouchers: Other: (list below)   |
|             | PHA Goal: Increase assisted housing choices   |
|             | Objectives:   |
|             | Provide voucher mobility counseling:  |
|             | Conduct outreach efforts to potential voucher landlords   |
|             | Increase voucher payment standards  |
|             | <ul><li>Implement voucher homeownership program:</li><li>Implement public housing or other homeownership programs:</li></ul>    |
|             | Implement public housing site-based waiting lists:  |
|             | Convert public housing to vouchers:   |
|             | Other: (list below)   |
| HUD         | Strategic Goal: Improve community quality of life and economic vitality   |
|             | PHA Goal: Provide an improved living environment  |
|             | Objectives:   |
|             | Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: |
|             | Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income   |
|             | developments:   |
|             | Implement public housing security improvements:   |
|             | Designate developments or buildings for particular resident groups (elderly, persons with disabilities)                         |
|             | Other: (list below)   |
|             | lay County HRA shall create and implement a "Preventive Maintenance Plan" cember 31, 2004.                                      |
| The (       | lay County HRA shall achieve and maintain an average of 3 days in responding  |
| to ro       | tine work orders by December 31, 2004.  |

#### **HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

|       | PHA Chouseh     |   |
|-------|-----------------|---|
| HUD S | Strateg         | ic Goal: Ensure Equal Opportunity in Housing for all American   |
|       | PHA C<br>Object | Goal: Ensure equal opportunity and affirmatively further fair housing ives:  Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:  Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:  Undertake affirmative measures to ensure accessible housing to person with all varieties of disabilities regardless of unit size required:  Other: (list below) |
| Other | PHA G           | Goals and Objectives: (list below)  |
| РНА ( | Goal:           | Create Home Ownership Opportunities for Low & Moderate-Income Families  |
|       | Objecti         | Meet with local communities to discuss creating low and moderate-income home ownership opportunities in their cities and how to accomplish it.  Partner with other agencies in the area to enhance their programs that contribute to low and moderate-income family home ownership.  Create or participate in the development of at least one (1) new home ownership opportunity by December 31, 2001.  |
|       |                 |   |

#### Annual PHA Plan PHA Fiscal Year 2001

[24 CFR Part 903.7]

| <u>i.</u> | Annual Plan Type:                                  |
|-----------|--|
| Sele      | ect which type of Annual Plan the PHA will submit. |
|           | Standard Plan                                      |
| Str       | reamlined Plan:                                    |
|           | High Performing PHA                                |
|           | Small Agency (<250 Public Housing Units)           |

#### Troubled Agency Plan

#### ii. Executive Summary of the Annual PHA Plan

**Administering Section 8 Only** 

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

Not applicable.

#### iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

#### **Table of Contents**

|              |  | <u> Page #</u> |
|--------------|--|----------------|
| $\mathbf{A}$ | nnual Plan   |                |
| i.           | Table of Contents                                    | 1              |
|              | 1. Housing Needs                                     | 1-1            |
|              | 2. Financial Resources                               | 2-1            |
|              | 3. Policies on Eligibility, Selection and Admissions | 3-1            |
|              | 4. Rent Determination Policies                       | 4-1            |
|              | 5. Operations and Management Policies                | 5-1            |
|              | 6. Grievance Procedures                              | 6-1            |
|              | 7. Capital Improvement Needs                         | 7-1            |
|              | 8. Demolition and Disposition                        | 8-1            |
|              | 9. Designation of Housing                            | 9-1            |
|              | 10. Conversions of Public Housing                    | 10-1           |
|              | 11. Homeownership                                    | 11-1           |
|              | 12. Community Service Programs                       | 12-1           |
|              | 2  |                |

| 13. Crime and Safety  | 13-1         |
|---|--------------|
| 14. Pets  | 14-1         |
| 15. Civil Rights Certifications (included with PHA Plan Certifications)   | 15-1         |
| 16. Audit   | 16-1         |
| 17. Asset Management  | 17-1         |
| 18. Other Information   | 18-1         |
|   |              |
| Attachments   |              |
| Indicate which attachments are provided by selecting all that apply. Provide the attachment's                               |              |
| B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is pro                             |              |
| <b>SEPARATE</b> file submission from the PHA Plans file, provide the file name in parentheses it to the right of the title. | in the space |
| to the right of the title.  |              |
| Required Attachments:   |              |
| Admissions Policy for Deconcentration * not applicable to CCHRA   |              |
| FY 2001 Capital Fund Program Annual Statement   |              |

Most recent board-approved operating budget (Required Attachment for PHAs

#### **Optional Attachments:**

| PHA | Management | Organiza | tional | Chart |
|-----|------------|----------|--------|-------|
| ГПА | Management | Organiza | шонаг  | CHa   |

FY 2000 Capital Fund Program 5 Year Action Plan

Public Housing Drug Elimination Program (PHDEP) Plan

Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)

that are troubled or at risk of being designated troubled ONLY)

Other (List below, providing each attachment name)

#### **Supporting Documents Available for Review**

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

|              | List of Supporting Documents Available for Review   |                              |  |  |  |  |
|--------------|---|------------------------------|--|--|--|--|
| Applicable & | Supporting Document   | Applicable Plan<br>Component |  |  |  |  |
| On Display   |   |                              |  |  |  |  |
| X            | PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations  | 5 Year and Annual Plans      |  |  |  |  |
| X            | State/Local Government Certification of Consistency with the Consolidated Plan  | 5 Year and Annual Plans      |  |  |  |  |
| X            | Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require | 5 Year and Annual Plans      |  |  |  |  |

|                 | List of Supporting Documents Available for Review  |   |  |  |  |  |
|-----------------|--|---|--|--|--|--|
| Applicable      | Supporting Document  | Applicable Plan                         |  |  |  |  |
| &<br>On Diamlan |  | Component                               |  |  |  |  |
| On Display      | 4h - DIJA?- im-sl  |   |  |  |  |  |
| X               | the PHA's involvement.   | Annual Plan:                            |  |  |  |  |
| Λ               | Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair       | Housing Needs                           |  |  |  |  |
|                 | Housing Choice (AI)) and any additional backup data to   | Housing Needs                           |  |  |  |  |
|                 | support statement of housing needs in the jurisdiction   |   |  |  |  |  |
| X               | Most recent board-approved operating budget for the public   | Annual Plan:                            |  |  |  |  |
| 71              | housing program  | Financial Resources;                    |  |  |  |  |
|                 | nousing program  | Timanetar resources,                    |  |  |  |  |
| X               | Public Housing Admissions and (Continued) Occupancy  | Annual Plan: Eligibility,               |  |  |  |  |
|                 | Policy (A&O), which includes the Tenant Selection and  | Selection, and Admissions               |  |  |  |  |
|                 | Assignment Plan [TSAP]   | Policies                                |  |  |  |  |
|                 |  |   |  |  |  |  |
| X               | Section 8 Administrative Plan  | Annual Plan: Eligibility,               |  |  |  |  |
|                 |  | Selection, and Admissions               |  |  |  |  |
|                 |  | Policies                                |  |  |  |  |
| X               | Public Housing Deconcentration and Income Mixing   | Annual Plan: Eligibility,               |  |  |  |  |
|                 | Documentation:   | Selection, and Admissions               |  |  |  |  |
|                 | 1. PHA board certifications of compliance with   | Policies                                |  |  |  |  |
|                 | deconcentration requirements (section 16(a) of the US  |   |  |  |  |  |
|                 | Housing Act of 1937, as implemented in the 2/18/99   |   |  |  |  |  |
|                 | Quality Housing and Work Responsibility Act Initial  |   |  |  |  |  |
|                 | <ul><li>Guidance; Notice and any further HUD guidance) and</li><li>Documentation of the required deconcentration and</li></ul> |   |  |  |  |  |
|                 | income mixing analysis   |   |  |  |  |  |
| X               | Public housing rent determination policies, including the  | Annual Plan: Rent                       |  |  |  |  |
| Α               | methodology for setting public housing flat rents  | Determination                           |  |  |  |  |
|                 | check here if included in the public housing   | 2 0001111111111111111111111111111111111 |  |  |  |  |
|                 | A & O Policy   |   |  |  |  |  |
| X               | Schedule of flat rents offered at each public housing  | Annual Plan: Rent                       |  |  |  |  |
| 11              | development  | Determination                           |  |  |  |  |
|                 | check here if included in the public housing   |   |  |  |  |  |
|                 | A & O Policy   |   |  |  |  |  |
| X               | Section 8 rent determination (payment standard) policies   | Annual Plan: Rent                       |  |  |  |  |
|                 | check here if included in Section 8  | Determination                           |  |  |  |  |
|                 | Administrative Plan  |   |  |  |  |  |
| X               | Public housing management and maintenance policy   | Annual Plan: Operations                 |  |  |  |  |
|                 | documents, including policies for the prevention or  | and Maintenance                         |  |  |  |  |
|                 | eradication of pest infestation (including cockroach   |   |  |  |  |  |
|                 | infestation)   |   |  |  |  |  |
| X               | Public housing grievance procedures  | Annual Plan: Grievance                  |  |  |  |  |
|                 | check here if included in the public housing   | Procedures                              |  |  |  |  |
|                 | A & O Policy   |   |  |  |  |  |
| X               | Section 8 informal review and hearing procedures   | Annual Plan: Grievance                  |  |  |  |  |
|                 | check here if included in Section 8  | Procedures                              |  |  |  |  |
|                 | Administrative Plan  |   |  |  |  |  |
|                 | The HUD-approved Capital Fund/Comprehensive Grant  | Annual Plan: Capital Need               |  |  |  |  |
|                 | Program Annual Statement (HUD 52837) for the active grant  | I I I I I I I I I I I I I I I I I I I   |  |  |  |  |
|                 | year   |   |  |  |  |  |

|                         | List of Supporting Documents Available for   | Review  |  |  |
|-------------------------|--|---|--|--|
| Applicable & On Display | Supporting Document  | Applicable Plan<br>Component  |  |  |
|                         | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant  | Annual Plan: Capital Needs  |  |  |
|                         | Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)   | Annual Plan: Capital Needs  |  |  |
|                         | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing                                | Annual Plan: Capital Needs  |  |  |
|                         | Approved or submitted applications for demolition and/or disposition of public housing   | Annual Plan: Demolition and Disposition                                   |  |  |
|                         | Approved or submitted applications for designation of public housing (Designated Housing Plans)  | Annual Plan: Designation of Public Housing                                |  |  |
|                         | Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act      | Annual Plan: Conversion of<br>Public Housing                              |  |  |
|                         | Approved or submitted public housing homeownership programs/plans  | Annual Plan:<br>Homeownership   |  |  |
|                         | Policies governing any Section 8 Homeownership program  check here if included in the Section 8  Administrative Plan   | Annual Plan:<br>Homeownership   |  |  |
| X                       | Any cooperative agreement between the PHA and the TANF agency  | Annual Plan: Community<br>Service & Self-Sufficiency                      |  |  |
| X                       | FSS Action Plan/s for public housing and/or Section 8  | Annual Plan: Community<br>Service & Self-Sufficiency                      |  |  |
|                         | Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports  The most recent Public Housing Drug Elimination Program                                    | Annual Plan: Community Service & Self-Sufficiency Annual Plan: Safety and |  |  |
|                         | (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)  | Crime Prevention  |  |  |
| X                       | The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings | Annual Plan: Annual Audit   |  |  |
|                         | Troubled PHAs: MOA/Recovery Plan Other supporting documents (optional) (list individually; use as many lines as necessary)   | Troubled PHAs (specify as needed)   |  |  |

#### 1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

#### A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

| Housing Needs of Families in the Jurisdiction<br>by Family Type |         |                    |        |         |                    |      |               |
|---|---------|--------------------|--------|---------|--------------------|------|---------------|
| Family Type   | Overall | Afford-<br>ability | Supply | Quality | Access-<br>ibility | Size | Loca-<br>tion |
| Income <= 30% of AMI  | 1302    | 5                  | 5      | 2       | 2                  | 2    | 2             |
| Income >30% but <=50% of AMI                                    | 529     | 5                  | 5      | 2       | 2                  | 2    | 2             |
| Income >50% but <80% of AMI                                     | 440     | 3                  | 3      | 2       | 2                  | 2    | 1             |
| Elderly   | 748     | 5                  | 5      | 2       | 1                  | 1    | 1             |
| Families with Disabilities                                      | 482     | 5                  | 5      | 2       | 5                  | 1    | 1             |
| Race/Ethnicity Black (non-hispanic)                             | 150     | 5                  | 3      | 2       | 1                  | 1    | 1             |
| Race/Ethnicity<br>Hispanic                                      | 890     | 5                  | 3      | 2       | 1                  | 3    | 3             |
| Race/Ethnicity Native American                                  | 425     | 5                  | 3      | 2       | 1                  | 1    | 1             |
| Race/Ethnicity<br>Asian/Pacific<br>Islander                     | 349     | 3                  | 2      | 2       | 1                  | 2    | 1             |

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

| $\boxtimes$ | Consolidated Plan of the Jurisdiction/s (City of Moorhead, Minnesota and the |
|-------------|--|
|             | Indicate year: 1999 State of Minnesoto                                       |
|             | U.S. Census data: the Comprehensive Housing Affordability Strategy           |
|             | ("CHAS") dataset   |
|             | American Housing Survey data   |
|             | Indicate year:   |
|             | Other housing market study   |

| Indicate year:   |
|--|
| Other sources: (list and indicate year of information) |

#### B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

| Н  | C             | nilies on the Waiting L<br>B - FY 2001 | ist             |
|--|---------------|--|-----------------|
| Waiting list type: (select one)  Section 8 tenant-based assistance Public Housing Combined Section 8 and Public Housing Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction: |               |  |                 |
|  | # of families | % of total families                    | Annual Turnover |
| Waiting list total   | 251           |  | 25%             |
| Extremely low income <=30% AMI   | 251           | 100%                                   |                 |
| Very low income (>30% but <=50% AMI)   |               |  |                 |
| Low income (>50% but <80% AMI)   | 0             |  |                 |
| Families with children   | 145           | 58%                                    |                 |
| Elderly families   | 8             | 3%                                     |                 |
| Families with Disabilities   | 47            | 19%                                    |                 |
| Race/ethnicity Black (non-hispanic)  | 5             | 2%                                     |                 |
| Race/ethnicity 23 9% Hispanic  |               |  |                 |
|  |               | 11%                                    |                 |
| Race/ethnicity Asian/Pacific Islander  | 12            | 5%                                     |                 |

| Housing Needs of Families on the Waiting List |  |                           |                 |  |
|---|--|---------------------------|-----------------|--|
|   |  | - FY 2001                 | T               |  |
| Characteristics by                            | Not Applicable to                                |                           |                 |  |
| Bedroom Size                                  | Section 8 Tenant                                 |                           |                 |  |
| (Public Housing                               | based Program                                    |                           |                 |  |
| Only)   |  |                           |                 |  |
| 1BR   |  |                           |                 |  |
| 2 BR  |  |                           |                 |  |
| 3 BR  |  |                           |                 |  |
| 4 BR  |  |                           |                 |  |
| 5 BR  |  |                           |                 |  |
| 5+ BR   |  |                           |                 |  |
| Is the waiting list clo                       | sed (select one)? N                              | o Yes                     |                 |  |
| If yes:                                       | · —  |                           |                 |  |
| How long has                                  | it been closed (# of mo                          | onths)?                   |                 |  |
| _   |  | st in the PHA Plan year   | ? No Yes        |  |
|   |  | ries of families onto the |                 |  |
| generally close                               |  |                           |                 |  |
|   |  |                           |                 |  |
|   |  |                           |                 |  |
| Н   | lousing Needs of Fami                            | ilies on the Waiting Li   | st              |  |
|   | Scattered Site Public                            | c Housing - FY 2001       |                 |  |
| Waiting list type: (sel-                      | ect one)   |                           |                 |  |
| Section 8 tenan                               | Section 8 tenant-based assistance                |                           |                 |  |
| Public Housing                                | Public Housing (24 Scattered Site duplex houses) |                           |                 |  |
| Combined Sect                                 | tion 8 and Public Housi                          | ing                       |                 |  |
| Public Housing                                | g Site-Based or sub-juri                         | sdictional waiting list ( | optional)       |  |
| If used, identif                              | fy which development/s                           | subjurisdiction:          |                 |  |
|   | # of families                                    | % of total families       | Annual Turnover |  |
|   |  |                           |                 |  |
| Waiting list total                            | 0  |                           | 10%             |  |
| Extremely low                                 | 0  | 0%                        |                 |  |
| income <=30% AMI                              |  |                           |                 |  |
| Very low income                               | 0  |                           |                 |  |
| (>30% but <=50%                               |  |                           |                 |  |
| AMI)  |  |                           |                 |  |
| Low income                                    | 0  |                           |                 |  |
| (>50% but <80%                                |  |                           |                 |  |
| AMI)  |  |                           |                 |  |
| Families with                                 | 0  | 0%                        |                 |  |
| children                                      |  |                           |                 |  |
| Elderly families                              | 0  |                           |                 |  |
| Families with                                 | 0  |                           |                 |  |
| Disabilities                                  |  |                           |                 |  |

| Housing Needs of Families on the Waiting List                                   |  |                           |                         |
|---|--|---------------------------|-------------------------|
| D / 11 * * *  |  | c Housing - FY 2001       | I                       |
| Race/ethnicity  | 0  |                           |                         |
| Black (non-   |  |                           |                         |
| hispanic)   | 0  |                           |                         |
| Race/ethnicity  | 0  |                           |                         |
| Hispanic  | 0  |                           |                         |
| Race/ethnicity  | 0  |                           |                         |
| Native American   | 0  |                           |                         |
| Race/ethnicity  | 0  |                           |                         |
| Asian/Pacific   |  |                           |                         |
| Islander  |  |                           |                         |
| Characteristics by  |  |                           |                         |
| Bedroom Size  |  |                           |                         |
| (Public Housing   |  |                           |                         |
| Only)   |  |                           |                         |
| 1BR   |  | No 1-BR units             |                         |
| 2 BR  |  | No 2-BR units             |                         |
| 3 BR  | 0  | No Applicants             | 10%                     |
| 4 BR  | 0  | No applicants             | 0%                      |
| 5 BR  | 0  | No 5-BR units             | 070                     |
| 5+ BR   |  | No 5+ BR units            |                         |
|   | and (animations)? N                                | L                         |                         |
| _   | sed (select one)? X                                | o res                     |                         |
| If yes:   | it been alored (# of mo                            | enthal?                   |                         |
| _   | it been closed (# of mo<br>expect to reopen the li |                           | r? No Yes               |
|   | permit specific catego                             | •                         |                         |
|   |  | ries of families onto the | e waiting fist, even if |
| generally closed?  No Yes   |  |                           |                         |
|   |  |                           |                         |
| C. Strategy for Add   | ressing Needs                                      |                           |                         |
|   | n of the PHA's strategy for a                      |                           |                         |
|   | iting list IN THE UPCOM                            | ING YEAR, and the Agenc   | y's reasons for         |
| choosing this strategy.   |  |                           |                         |
| (1) Strategies  |  |                           |                         |
| Need: Shortage of affordable housing for all eligible populations               |  |                           |                         |
|   |  |                           |                         |
| Strategy 1. Maximize the number of affordable units available to the PHA within |  |                           |                         |
| its current resources   | by:  |                           |                         |
| Select all that apply   |  |                           |                         |
|   | ive maintenance and m                              | anagement policies to t   | ninimize the            |
|   | olic housing units off-li                          |                           | mminize die             |
| number of put   | The flousing units off-in                          |                           |                         |

| Strate      | gy 1: Target available assistance to families at or below 50% of AMI  |
|-------------|---|
| Need:       | Specific Family Types: Families at or below 50% of median   |
|             | Employ admissions preferences aimed at families with economic hardships<br>Adopt rent policies to support and encourage work<br>Other: (list below)                           |
|             | Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance  |
|             | Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing   |
|             | gy 1: Target available assistance to families at or below 30 % of AMI ll that apply   |
|             | Specific Family Types: Families at or below 30% of median  Types: Families at or below 30% of AMI   |
|             | Other: (list below)   |
| $\boxtimes$ | of mixed - finance housing Pursue housing resources other than public housing or Section 8 tenant-based assistance.   |
|             | Apply for additional section 8 units should they become available<br>Leverage affordable housing resources in the community through the creation                              |
| Select a    | ll that apply   |
| Strate      | gy 2: Increase the number of affordable housing units by:   |
|             | coordination with broader community strategies<br>Other (list below)  |
| $\boxtimes$ | Participate in the Consolidated Plan development process to ensure  |
|             | Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program   |
|             | Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration                   |
|             | Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required  |
|             | 8 replacement housing resources Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction |
|             | Seek replacement of public housing units lost to the inventory through section  |
|             | Reduce time to renovate public housing units Seek replacement of public housing units lost to the inventory through mixed finance development                                 |
| $\boxtimes$ | Reduce turnover time for vacated public housing units   |

| Select al      | ll that apply  |
|----------------|--|
|                | Employ admissions preferences aimed at families who are working<br>Adopt rent policies to support and encourage work<br>Other: (list below)  |
| Need:          | Specific Family Types: The Elderly   |
|                | gy 1: Target available assistance to the elderly:  |
| Select a       | ll that apply  |
|                | Seek designation of public housing for the elderly<br>Apply for special-purpose vouchers targeted to the elderly, should they become<br>available<br>Other: (list below)   |
| Need:          | <b>Specific Family Types: Families with Disabilities</b>   |
|                | y 1: Target available assistance to Families with Disabilities:  |
| Select a       | ll that apply  |
|                | Seek designation of public housing for families with disabilities Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing Apply for special-purpose vouchers targeted to families with disabilities, should they become available Affirmatively market to local non-profit agencies that assist families with disabilities Other: (list below) |
| Need:<br>needs | Specific Family Types: Races or ethnicities with disproportionate housing  |
|                | gy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:   |
| Select if      | applicable   |
|                | Affirmatively market to races/ethnicities shown to have disproportionate housing needs Other: (list below)   |
|                | gy 2: Conduct activities to affirmatively further fair housing   |
| Select a       | ll that apply  |
|                | Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units  |

|             | Market the section 8 program to owners outside of areas of poverty /minority concentrations                   |
|-------------|---|
|             | Other: (list below)   |
| Other       | Housing Needs & Strategies: (list needs and strategies below)   |
| (2) Re      | asons for Selecting Strategies  |
| Of the      | factors listed below, select all that influenced the PHA's selection of the                                   |
| strateg     | ies it will pursue:   |
|             |   |
| $\boxtimes$ | Funding constraints   |
| $\boxtimes$ | Staffing constraints  |
|             | Limited availability of sites for assisted housing  |
|             | Extent to which particular housing needs are met by other organizations in the community                      |
|             | Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA |
|             | Influence of the housing market on PHA programs   |
| H           | Community priorities regarding housing assistance   |
| Ħ           | Results of consultation with local or state government  |
|             | Results of consultation with residents and the Resident Advisory Board  |
| Ħ           | Results of consultation with advocacy groups  |
| Ħ           | Other: (list below)   |
|             |   |
| 2. St       | atement of Financial Resources  |

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

| Finai                              | ncial Resources: |                     |
|------------------------------------|------------------|---------------------|
| Planned Sources and Uses - 2001    |                  |                     |
| Sources                            | Planned \$       | <b>Planned Uses</b> |
| 1. Federal Grants (FY 2001 grants) |                  |                     |

| Financial Resources: Planned Sources and Uses - 2001 |            |                     |
|--|------------|---------------------|
| Sources  | Planned \$ | <b>Planned Uses</b> |
| a) Public Housing Operating Fund                     |            |                     |
| b) Public Housing Capital Fund                       | 53,176     |                     |
| c) HOPE VI Revitalization                            |            |                     |
| d) HOPE VI Demolition                                |            |                     |
| e) Annual Contributions for Section                  | 1,051,492  |                     |
| 8 Tenant-Based Assistance                            |            |                     |
| f) Public Housing Drug Elimination                   |            |                     |
| Program (including any Technical                     |            |                     |
| Assistance funds)                                    |            |                     |
| g) Resident Opportunity and Self-                    |            |                     |
| Sufficiency Grants                                   |            |                     |
| h) Community Development Block                       |            |                     |
| Grant  |            |                     |
| i) HOME  |            |                     |
| Other Federal Grants (list below)                    |            |                     |
| 2 D' V Filado d                                      |            |                     |
| 2. Prior Year Federal Grants                         |            |                     |
| (unobligated funds only) (list below)                |            |                     |
| below)   |            |                     |
|  |            |                     |
|  |            |                     |
| 3. Public Housing Dwelling Rental                    | 52,737     | Operating expenses  |
| Income   |            | operating expenses  |
|  |            |                     |
| <b>4. Other income</b> (list below)                  |            |                     |
| Interest income                                      | 8,489      |                     |
| Bad Debt Recapture                                   | 3004       |                     |
| 4. Non-federal sources (list below)                  |            |                     |
| RAFS Annual Contributions                            | 120,000    |                     |
|  |            |                     |
| Total resources                                      | 1,288,898  |                     |
|  | -,,->      |                     |
|  |            |                     |

#### 3. PHA Policies Governing Eligibility, Selection, and Admissions

#### A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

| a. Wh                  | en does the PHA verify eligibility for admission to public housing? (select all   |
|------------------------|---|
| that                   | t apply)  |
|                        | When families are within a certain number of being offered a unit: (state number)   |
|                        | When families are within a certain time of being offered a unit: (state time) Other: (describe) Because Clay County HRA has only 24 units of Scattered Site Public Housing and very little turnover, we verify a a waiting lis family's eligibility when we become aware that we have an opening coming up. Generally this is within 30 days of being offered a unit. |
|                        | ich non-income (screening) factors does the PHA use to establish eligibility for nission to public housing (select all that apply)?   |
|                        | Criminal or Drug-related activity   |
| Ħ                      | Rental history  |
| $\overline{\boxtimes}$ | Housekeeping  |
|                        | Other (describe)  |
| c. 🖂                   | Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?   |
| d                      | Yes No: Does the PHA request criminal records from State law  |
|                        | enforcement agencies for screening purposes?  |
| e                      | Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)  |
| (2)Wa                  | niting List Organization  |
|                        | ich methods does the PHA plan to use to organize its public housing waiting list ect all that apply)  Community-wide list  Sub-jurisdictional lists  Site-based waiting lists   |
| Ш                      | Other (describe)  |
|                        |   |

All our public housing units are 3 and 4 bedroom Scattered Site duplex houses located in 3 small communities. Our waiting lists are maintained as community-wide lists.

| <ul> <li>b. Where may interested persons apply for admission to public housing?</li> <li>PHA main administrative office</li> <li>PHA development site management office</li> <li>Other (list below)</li> </ul>   |
|--|
| c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection (3) <b>Assignment</b>   |
| 1. How many site-based waiting lists will the PHA operate in the coming year? 3  |
| 2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  If yes, how many lists?   |
| 3. Xes No: May families be on more than one list simultaneously If yes, how many lists? 3  |
| <ul> <li>4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?</li> <li>PHA main administrative office</li> <li>All PHA development management offices</li> <li>Management offices at developments with site-based waiting lists</li> <li>At the development to which they would like to apply</li> <li>Other (list below)</li> </ul> |
| (3) Assignment   |
| <ul> <li>a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)</li> <li>One</li> <li>Two</li> <li>Three or more</li> </ul>  |
| b. Xes No: Is this policy consistent across all waiting list types?  |
| c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:   |
| (4) Admissions Preferences   |
| a. Income targeting:  Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?   |

| b. Transfer policies:  |                 |
|--|-----------------|
| In what circumstances will transfers take precedence over new admission  | ons? (list      |
| below)   | `               |
| Emergencies  |                 |
| Overhoused   |                 |
| Underhoused  |                 |
| Medical justification  |                 |
| Underhoused  Underhoused  Medical justification  Administrative reasons determined by the PHA (e.g., to permit recognition)                      | nodernization   |
| work)  |                 |
| Resident choice: (state circumstances below)   |                 |
| Other: (list below)  |                 |
| When a family no longer qualifies for a 2 on 4 hodroom Scattoned Site of   | antal due to a  |
| When a family no longer qualifies for a 3 or 4 bedroom Scattered Site reduced family size, they will be transferred to the Section 8 tenant-base |                 |
| reduced family size, they will be transferred to the Section 8 tenant-base   | za program.     |
| c. Preferences   |                 |
| 1. ☐ Yes ☒ No: Has the PHA established preferences for admission   | to public       |
| housing (other than date and time of application)  |                 |
| selected, skip to subsection (5) Occupancy)  |                 |
|  |                 |
| 2. Which of the following admission preferences does the PHA plan to   | employ in the   |
| coming year? (select all that apply from either former Federal prefer  | rences or other |
| preferences)   |                 |
|  |                 |
| Former Federal preferences:  |                 |
| Involuntary Displacement (Disaster, Government Action, Action  | n of Housing    |
| Owner, Inaccessibility, Property Disposition)  |                 |
| Victims of domestic violence   |                 |
| Substandard housing  |                 |
| Homelessness   |                 |
| High rent burden (rent is $> 50$ percent of income)  |                 |
| Other preferences: (select below)  |                 |
| Working families and those unable to work because of age or dis  | eahility        |
| Veterans and veterans' families  | sability        |
| Residents who live and/or work in the jurisdiction   |                 |
| Those enrolled currently in educational, training, or upward mob   | nility programs |
| Households that contribute to meeting income goals (broad rang   |                 |
| Households that contribute to meeting income requirements (target)   |                 |
| Those previously enrolled in educational, training, or upward mo   |                 |
| programs   | Jointy          |
| Victims of reprisals or hate crimes  |                 |
| Other preference(s) (list below)   |                 |
| office preference(s) (list below)  |                 |

the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc. Date and Time Former Federal preferences: Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden Other preferences (select all that apply) Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below) 4. Relationship of preferences to income targeting requirements: The PHA applies preferences within income tiers Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements (5) Occupancy a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply) The PHA-resident lease The PHA's Admissions and (Continued) Occupancy policy PHA briefing seminars or written materials Other source (list) The Clay County Housing & Redevelopment Authority Scattered Site Housing "Tenant Handbook". b. How often must residents notify the PHA of changes in family composition? (select all that apply)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in

|               | At an annual reexamination and lease renewal Any time family composition changes At family request for revision Other (list)  |
|---------------|---|
| (6) De        | econcentration and Income Mixing  |
| a. 🗌          | Yes No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?   |
|               | CHRA public housing units are scattered sites in 3 different communities. As they are already de-concentrated.  |
| b. 🗌          | Yes No: Did the PHA adopt any changes to its <b>admissions policies</b> based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?   |
| c. If th      | ne answer to b was yes, what changes were adopted? (select all that apply) Adoption of site-based waiting lists If selected, list targeted developments below:  |
|               | Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments If selected, list targeted developments below:  |
|               | Employing new admission preferences at targeted developments If selected, list targeted developments below:   |
|               | Other (list policies and developments targeted below)   |
| d. 🗌          | Yes No: Did the PHA adopt any changes to <b>other</b> policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?  |
| e. If the app | he answer to d. was Yes, how would you describe these changes? (select all that bly)  |
|               | Additional affirmative marketing Actions to improve the marketability of certain developments Adoption or adjustment of ceiling rents for certain developments Adoption of rent incentives to encourage deconcentration of poverty and income-mixing Other (list below) |

| f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)  Not applicable: results of analysis did not indicate a need for such efforts  List (any applicable) developments below:               |
|---|
| g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)  Not applicable: results of analysis did not indicate a need for such efforts  List (any applicable) developments below:                |
| B. Section 8  Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B.  Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates). |
| (1) Elizibilitz   |
| (1) Eligibility   |
| <ul> <li>a. What is the extent of screening conducted by the PHA? (select all that apply)</li> <li>Criminal or drug-related activity only to the extent required by law or regulation</li> </ul>  |
| Criminal and drug-related activity, more extensively than required by law or regulation   |
| More general screening than criminal and drug-related activity (list factors below)   |
| Other (list below)  |
| b. X Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?  |
| c. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?  |
| d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)   |
| e. Indicate what kinds of information you share with prospective landlords? (select all that apply)   |
| Criminal or drug-related activity  Other (describe below)   |
|   |

#### (2) Waiting List Organization a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply) None Federal public housing Federal moderate rehabilitation Federal project-based certificate program Other federal or local program (list below) b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply) PHA main administrative office Other (list below) (3) Search Time a. Yes No: Does the PHA give extensions on standard 60-day period to search for a unit? If yes, state circumstances below: CCHRA allows 1 extension on cases where the family can show a hardship or other circumstance, which make it impossible for a family to locate suitable housing. (4) Admissions Preferences a. Income targeting Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income? b. Preferences 1. Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)

Former Federal preferences

preferences)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other

|                           | Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  |
|---------------------------|---|
|                           | Victims of domestic violence  |
| Ħ                         | Substandard housing   |
| $\square$                 | Homelessness (we have a special purpose Homeless Program - voucher)   |
|                           | High rent burden (rent is > 50 percent of income)   |
|                           |   |
| Other 1                   | preferences (select all that apply)   |
|                           | Working families and those unable to work because of age or disability  |
|                           | Veterans and veterans' families   |
|                           | Residents who live and/or work in your jurisdiction   |
|                           | Those enrolled currently in educational, training, or upward mobility programs  |
|                           | Households that contribute to meeting income goals (broad range of incomes)   |
|                           | Households that contribute to meeting income requirements (targeting)   |
|                           | Those previously enrolled in educational, training, or upward mobility  |
|                           | programs  |
|                           | Victims of reprisals or hate crimes   |
| $\bowtie$                 | Other preference(s) (list below)  |
| bedroc                    | es, due to reduced size, that are no longer eligible for one of our 3 or 4 om Scattered Site Public Housing rentals, are given a preference to transfer to 8 tenant-based assistance.   |
| the<br>seco<br>cho<br>sam | e PHA will employ admissions preferences, please prioritize by placing a "1" in space that represents your first priority, a "2" in the box representing your ond priority, and so on. If you give equal weight to one or more of these ices (either through an absolute hierarchy or through a point system), place the e number next to each. That means you can use "1" more than once, "2" more in once, etc. |
|                           | Date and Time   |
| Forme                     | r Federal preferences   |
|                           | Involuntary Displacement (Disaster, Government Action, Action of Housing  |
|                           | Owner, Inaccessibility, Property Disposition)   |
|                           | Victims of domestic violence  |
|                           | Substandard housing   |
|                           | Homelessness  |
|                           | High rent burden  |
|                           |   |
| Other 1                   | preferences (select all that apply)   |
| H                         | Working families and those unable to work because of age or disability  |
| $\vdash$                  | Veterans and veterans' families   |
| H                         | Residents who live and/or work in your jurisdiction   |
|                           | Those enrolled currently in educational, training, or upward mobility programs  |

| H T              | Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility rograms Victims of reprisals or hate crimes Other preference(s) (list below) |
|------------------|---|
|                  | transferring from CCHRA's Scattered Site Public Housing Program due to family size.   |
| applie D         | ng applicants on the waiting list with equal preference status, how are cants selected? (select one) Date and time of application Drawing (lottery) or other random choice technique  |
| jurisdi<br>T     | PHA plans to employ preferences for "residents who live and/or work in the iction" (select one) This preference has previously been reviewed and approved by HUD The PHA requests approval for this preference through this PHA Plan  |
| T N              | ionship of preferences to income targeting requirements: (select one) The PHA applies preferences within income tiers Not applicable: the pool of applicant families ensures that the PHA will meet acome targeting requirements  |
| (5) Spec         | cial Purpose Section 8 Assistance Programs  |
| eligibi<br>admin | ich documents or other reference materials are the policies governing ility, selection, and admissions to any special-purpose section 8 program sistered by the PHA contained? (select all that apply) The Section 8 Administrative Plan Briefing sessions and written materials Other (list below)   |
| progr<br>T       | does the PHA announce the availability of any special-purpose section 8 rams to the public? Through published notices Other (list below)  |
| •                | ion of area homeless shelters of the availability of special purpose "homeless<br>' program.  |
|                  |   |

FY 2001 Annual Plan Page 24

**4. PHA Rent Determination Policies** [24 CFR Part 903.7 9 (d)]

#### A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

#### (1) Income Based Rent Policies

Describe the PHA's income based rent setting policy/ies for public housing use, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

| a. Use    | of discretionary policies: (select one)   |
|-----------|---|
|           | The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2)) |
| or        |   |
|           | The PHA employs discretionary policies for determining income-based rent (If selected, continue to question b.)   |
| b. Mini   | imum Rent   |
|           | t amount best reflects the PHA's minimum rent? (select one)<br>\$0<br>\$1-\$25<br>\$26-\$50   |
| 2. 🔲 Y    | Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?   |
| 3. If yes | s to question 2, list these policies below:   |
| c. Ren    | ts set at less than 30% than adjusted income  |
| 1. X      | Yes No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?   |
| •         | s to above, list the amounts or percentages charged and the circumstances er which these will be used below:  |
|           |   |

CCHRA has established flat rents for all 24 of its Scattered Site units. When a family's TTP minus the UA exceeds the flat rent amount, the family has the choice of paying the flat rent or continuing to pay 30% of MAI. Flat rents are listed below.

FLAT RENT

\$400 / mo.

**LOCATION** 

Dilworth 3-BR units

|   | Dilworth 3-BK units   | \$400 / mo.                           |
|---|---|---------------------------------------|
|   | Dilworth 4-BR units   | \$450 / mo.                           |
|   | Hawley 3-BR units   | \$350 / mo.                           |
|   | Hawley 4-BR units   | \$400 / mo.                           |
|   | Ulen 3-BR units   | \$300 / mo.                           |
|   | Ulen 4-BR units   | \$350 / mo.                           |
| <ul> <li>d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)</li> <li>For the earned income of a previously unemployed household member</li> <li>For increases in earned income</li> <li>Fixed amount (other than general rent-setting policy)</li> <li>If yes, state amount/s and circumstances below:</li> </ul> |   |                                       |
| •   | County HRA will disregard earned income for<br>es whose only previous income was TANF inc   |                                       |
|   | Fixed percentage (other than general rent-se If yes, state percentage/s and circums   | · · · · · · · · · · · · · · · · · ·   |
|   | For household heads For other family members For transportation expenses For the non-reimbursed medical expenses of families Other (describe below) | f non-disabled or non-elderly         |
| e. Ceil   | ing rents   |                                       |
|   | you have ceiling rents? (rents set at a level le<br>lect one)   | ower than 30% of adjusted income)     |
|   | Yes for all developments<br>Yes but only for some developments<br>No  |                                       |
| 2. For  | r which kinds of developments are ceiling rer   | nts in place? (select all that apply) |
|   | For all developments  |                                       |
|   |   |                                       |

|        | For all general occupancy developments (not elderly or disabled or elderly only)  For specified general occupancy developments  For certain parts of developments; e.g., the high-rise portion  |
|--------|---|
|        | For certain size units; e.g., larger bedroom sizes Other (list below)   |
|        | lect the space or spaces that best describe how you arrive at ceiling rents (select that apply)   |
|        | Market comparability study Fair market rents (FMR) 95 <sup>th</sup> percentile rents 75 percent of operating costs 100 percent of operating costs for general occupancy (family) developments Operating costs plus debt service The "rental value" of the unit Other (list below)   |
| f. Ren | at re-determinations:   |
| or     | ween income reexaminations, how often must tenants report change to income family composition to the PHA such that the changes result in an adjustment to at? (select all that apply)  Never  At family option  Any time the family experiences an income increase  |
|        | Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) Other (list below)  |
| g. 🗌   | Yes No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?   |
| (2) Fl | at Rents  |
|        | setting the market-based flat rents, what sources of information did the PHA use establish comparability? (select all that apply.)  The section 8 rent reasonableness study of comparable housing Survey of rents listed in local newspaper  Survey of similar unassisted units in the neighborhood/community.  Other (list/describe below) |

#### **B.** Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

#### (1) Payment Standards Describe the voucher payment standards and policies. a. What is the PHA's payment standard? (select the category that best describes your standard) At or above 90% but below 100% of FMR 100% of FMR Above 100% but at or below 110% of FMR Above 110% of FMR (if HUD approved; describe circumstances below) b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply) FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area The PHA has chosen to serve additional families by lowering the payment standard Reflects market or submarket Other (list below) c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply) FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area Reflects market or submarket To increase housing options for families Other (list below) d. How often are payment standards reevaluated for adequacy? (select one) Annually Other (list below) e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply) Success rates of assisted families Rent burdens of assisted families Other (list below)

# a. What amount best reflects the PHA's minimum rent? (select one) \$0 \$1-\$25 \$26-\$50 b. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below) 5. Operations and Management [24 CFR Part 903.7 9 (e)] Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

An organization chart showing the PHA's management structure and organization is attached.
 A brief description of the management structure and organization of the PHA follows:

CCHRA has a 6 member Board, 1 of which is a tenant/participant member. All members are by appointment of the Clay County Board of County Commissioners. The Board hires the Executive Director to administer programs and hire staff. All 8.5 employees work under the supervision of the Executive Director.

#### **B. HUD Programs Under PHA Management**

A. PHA Management Structure

(select one)

Describe the PHA's management structure and organization.

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

| Program Name            | Units or Families   | Expected |
|-------------------------|---------------------|----------|
|                         | Served at Year      | Turnover |
|                         | Beginning           |          |
| Public Housing          | 24                  | 10%      |
| Section 8 Vouchers      | 95                  | 25%      |
| Section 8 Certificates  | 239                 | 25%      |
| Section 8 Mod Rehab     |                     |          |
| Special Purpose Section | 22 Voucher for the  | 5%       |
| 8 Certificates/Vouchers | Homeless            |          |
| (list individually)     |                     |          |
|                         | 25 FSS Certificates | 10%      |
| Public Housing Drug     |                     |          |

| Elimination Program |                  |     |
|---------------------|------------------|-----|
| (PHDEP)             |                  |     |
|                     |                  |     |
|                     |                  |     |
| Other Federal       |                  |     |
| Programs(list       |                  |     |
| individually)       |                  |     |
| Section 515         | 24 elderly units | 5%  |
| Section 223(d)(3)   | 60 elderly units | 10% |

#### C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

#### (1) **Public Housing Maintenance and Management**: (list below)

Scattered Site ACOP Check Signing Policy

Disposition Policy Drug-Free Workplace Policy

Equal Opportunity Policy Facilities Use Policy
Fund Transfer Policy Investment Policy
Personnel Policy Pest Control Policy

Procurement Policy Pet Policy

#### (2) **Section 8 Management**: (list below)

Section 8 Administrative PlanCheck Signing Policy

Disposition Policy Drug-Free Workplace Policy

Equal Opportunity Policy Fund Transfer Policy Investment Policy Personnel Policy

#### 6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

#### A. Public Housing

1. Yes No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

| 2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)   |
|---|
| PHA main administrative office PHA development management offices Other (list below)  |
| PHA development management offices  |
| Other (list below)  |
| B. Section 8 Tenant-Based Assistance  |
| 1. Yes No: Has the PHA established informal review procedures for applicants  |
| to the Section 8 tenant-based assistance program and informal   |
| hearing procedures for families assisted by the Section 8 tenant-   |
| based assistance program in addition to federal requirements  |
| found at 24 CFR 982?  |
| If yes, list additions to federal requirements below:   |
| 2. Which PHA office should applicants or assisted family's contact to initiate the  |
| informal review and informal hearing processes? (select all that apply)   |
| PHA main administrative office Other (list below)   |
| Other (list below)  |
| 7. Capital Improvement Needs  |
| [24 CFR Part 903.7 9 (g)]   |
| Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.   |
| may step to component of  |
| A. Capital Fund Activities  |
| Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may  |
| skip to component 7B. All other PHAs must complete 7A as instructed.  |
| (1) Capital Fund Program Annual Statement   |
| Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital   |
| activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability   |
| of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template <b>OR</b> , at the PHA's |
| option, by completing and attaching a properly updated HUD-52837.   |
| Calactional   |
| Select one:  The Capital Fund Program Annual Statement is provided as an attachment to  |
| the PHA Plan at Attachment (state name)   |
| -or-  |
|   |
| The Capital Fund Program Annual Statement is provided below: (if selected,  |
| copy the CFP Annual Statement from the Table Library and insert here)   |
|   |

### Component 7 Capital Fund Program Annual Statement Parts I, II, and II

#### Annual Statement Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number MN46P16450101 FFY of Grant Approval: 2001

Original Annual Statement

| Line No. | Summary by Development Account                            | Total Estimated<br>Cost |
|----------|---|-------------------------|
| 1        | Total Non-CGP Funds                                       |                         |
| 2        | 1406 Operations   | \$53,176                |
| 3        | 1408 Management Improvements                              |                         |
| 4        | 1410 Administration                                       |                         |
| 5        | 1411 Audit  |                         |
| 6        | 1415 Liquidated Damages                                   |                         |
| 7        | 1430 Fees and Costs                                       |                         |
| 8        | 1440 Site Acquisition                                     |                         |
| 9        | 1450 Site Improvement                                     |                         |
| 10       | 1460 Dwelling Structures                                  |                         |
| 11       | 1465.1 Dwelling Equipment-Nonexpendable                   |                         |
| 12       | 1470 Nondwelling Structures                               |                         |
| 13       | 1475 Nondwelling Equipment                                |                         |
| 14       | 1485 Demolition   |                         |
| 15       | 1490 Replacement Reserve                                  |                         |
| 16       | 1492 Moving to Work Demonstration                         |                         |
| 17       | 1495.1 Relocation Costs                                   |                         |
| 18       | 1498 Mod Used for Development                             |                         |
| 19       | 1502 Contingency  |                         |
| 20       | Amount of Annual Grant (Sum of lines 2-19)                | \$53,176                |
| 21       | Amount of line 20 Related to LBP Activities               |                         |
| 22       | Amount of line 20 Related to Section 504 Compliance       |                         |
| 23       | Amount of line 20 Related to Security                     |                         |
| 24       | Amount of line 20 Related to Energy Conservation Measures |                         |

#### Annual Statement Capital Fund Program (CFP) Part II: Supporting Table - 2001

| Development<br>Number/Name<br>HA-Wide Activities | General Description of Major Work<br>Categories | Development<br>Account<br>Number | Total<br>Estimated<br>Cost |
|--|---|----------------------------------|----------------------------|
| MN164  | Operations                                      | 1406                             | \$51,176                   |
|  |   |                                  |                            |
|  |   |                                  |                            |
|  |   |                                  |                            |
|  |   |                                  |                            |
|  |   |                                  |                            |
|  |   |                                  |                            |
|  |   |                                  |                            |

#### Annual Statement Capital Fund Program (CFP) Part III: Implementation Schedule - 2001

| Development<br>Number/Name<br>HA-Wide Activities | All Funds Obligated (Quarter Ending Date) | All Funds Expended (Quarter Ending Date) |
|--|---|--|
| MN164  | December 2001                             | December 2001                            |

| (2) Optional    | 5-Year Action Plan  |
|-----------------|---|
| can be complete | couraged to include a 5-Year Action Plan covering capital work items. This statement d by using the 5 Year Action Plan table provided in the table library at the end of the late <b>OR</b> by completing and attaching a properly updated HUD-52834.   |
| a.  Yes X       | No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)   |
| The C           | uestion a, select one:<br>Capital Fund Program 5-Year Action Plan is provided as an attachment to<br>HA Plan at Attachment (state name  |
|                 | Capital Fund Program 5-Year Action Plan is provided below: (if selected, the CFP optional 5 Year Action Plan from the Table Library and insert  |
|                 | VI and Public Housing Development and Replacement<br>Non-Capital Fund)  |
|                 | sub-component 7B: All PHAs administering public housing. Identify any approved r public housing development or replacement activities not described in the Capital Fund Statement.  |
| ☐ Yes ⊠ 1       | No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary) b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)   |
|                 | <ol> <li>Development name:</li> <li>Development (project) number:</li> <li>Status of grant: (select the statement that best describes the current status)         <ul> <li>Revitalization Plan under development</li> <li>Revitalization Plan submitted, pending approval</li> <li>Revitalization Plan approved</li> <li>Activities pursuant to an approved Revitalization Plan underway</li> </ul> </li> </ol> |
| ☐ Yes ⊠ 1       | No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?  If yes, list development name/s below:  |

| Yes No: d   | Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?  If yes, list developments or activities below:   |
|---|---|
| ☐ Yes ⊠ No: e)  | Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?  If yes, list developments or activities below:   |
| 8. Demolition an  |   |
| [24 CFR Part 903.7 9 (h)]                                   | nt 8: Section 8 only PHAs are not required to complete this section.  |
| rippineuciney of compone                                    | in of Beenon o only 111 is the not required to complete this section.   |
| 1. Yes No:  | Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.) |
| 2. Activity Description                                     | on  |
| Yes No:   | Has the PHA provided the activities description information in the <b>optional</b> Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.)  |
|   | <b>Demolition/Disposition Activity Description</b>  |
| 1a. Development nam   |   |
| 1b. Development (pro  |   |
| 2. Activity type: Den                                       |   |
| Dispos  |   |
| 3. Application status Approved Submitted, pe Planned applie | nding approval  |
| 4. Date application ap                                      | pproved, submitted, or planned for submission: (DD/MM/YY)   |
| 5. Number of units af                                       | fected:   |
| 6. Coverage of action                                       |   |
| Part of the develo  | <u>-</u>  |
| Total developmen  |   |
| 7. Timeline for activ                                       | · ·   |
| •   | rojected start date of activity: nd date of activity:   |
| o. 1 Tojecieu e.  | nd date of activity.  |

### 9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with **Disabilities** [24 CFR Part 903.7 9 (i)] Exemptions from Component 9; Section 8 only PHAs are not required to complete this section. 1. Yes No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.) 2. Activity Description Yes No: Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? If "yes", skip to component 10. If "No", complete the Activity Description table below. **Designation of Public Housing Activity Description** 1a. Development name: 1b. Development (project) number: 2. Designation type: Occupancy by only the elderly Occupancy by families with disabilities Occupancy by only elderly families and families with disabilities 3. Application status (select one) Approved; included in the PHA's Designation Plan Submitted, pending approval Planned application 4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY) 5. If approved, will this designation constitute a (select one) New Designation Plan Revision of a previously-approved Designation Plan? 6. Number of units affected: 7. Coverage of action (select one)

Part of the development Total development

# 10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

|                        | Reasonable Revitalization Pursuant to section 202 of the HUD  D Appropriations Act   |
|------------------------|--|
| 1. ☐ Yes ⊠ No:         | Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.) |
| 2. Activity Descripti  | on   |
| Yes No:                | Has the PHA provided all required activity description information for this component in the <b>optional</b> Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.  |
| Con                    | version of Public Housing Activity Description   |
| 1a. Development nar    | ne:  |
| 1b. Development (pr    | oject) number:   |
| 2. What is the status  | of the required assessment?  |
| Assessme               | ent underway   |
| Assessme               | ent results submitted to HUD   |
| Assessmo question      | ent results approved by HUD (if marked, proceed to next n)   |
| Other (ex              | aplain below)  |
| 3. Yes No: 1 block 5.) | Is a Conversion Plan required? (If yes, go to block 4; if no, go to  |
| 4. Status of Convers   | ion Plan (select the statement that best describes the current   |
| status)                |  |
| Conversi               | on Plan in development   |
| <b>=</b>               | on Plan submitted to HUD on: (DD/MM/YYYY)  |
| Conversi               | on Plan approved by HUD on: (DD/MM/YYYY)   |
| Activities             | s pursuant to HUD-approved Conversion Plan underway  |
|                        | w requirements of Section 202 are being satisfied by means other   |
| than conversion (sele  | ect one)   |

| Units add  | ressed in a pending or approved demolition application (date  |
|--|---|
| Units add  | submitted or approved: ressed in a pending or approved HOPE VI demolition application (date submitted or approved: )  |
| Units add  | ressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:  |
|  | ents no longer applicable: vacancy rates are less than 10 percent ents no longer applicable: site now has less than 300 units   |
|  | escribe below)  |
|  |   |
| B. Reserved for Con<br>1937                        | nversions pursuant to Section 22 of the U.S. Housing Act of   |
|  |   |
| C. Reserved for Con<br>1937                        | nversions pursuant to Section 33 of the U.S. Housing Act of   |
| 11. Homeowners [24 CFR Part 903.7 9 (k)]           | hip Programs Administered by the PHA  |
| <b>A. Public Housing</b> Exemptions from Component | nent 11A: Section 8 only PHAs are not required to complete 11A.   |
| 1. ☐ Yes ⊠ No:                                     | Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If "No", skip to component 11B; if "yes", complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to <b>small PHA</b> or <b>high performing PHA</b> status. PHAs completing streamlined submissions may skip to component 11B.) |
| 2. Activity Description  ☐ Yes ☐ No:               | Has the PHA provided all required activity description information for this component in the <b>optional</b> Public Housing Asset Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.)   |

|   | c Housing Homeownership Activity Description Complete one for each development affected)   |  |  |  |
|---|--|--|--|--|
| 1a. Development name:                       |  |  |  |  |
| 1b. Development (proj                       |  |  |  |  |
| 2. Federal Program aut                      |  |  |  |  |
| ☐ HOPE I                                    |  |  |  |  |
| 5(h)  |  |  |  |  |
| Turnkey II                                  | I  |  |  |  |
|   | of the USHA of 1937 (effective 10/1/99)  |  |  |  |
| 3. Application status: (                    |  |  |  |  |
| Approved;                                   | included in the PHA's Homeownership Plan/Program   |  |  |  |
| Submitted,                                  | , pending approval   |  |  |  |
| Planned ap                                  | pplication   |  |  |  |
| 4. Date Homeownersh                         | ip Plan/Program approved, submitted, or planned for submission:  |  |  |  |
| (DD/MM/YYYY)                                |  |  |  |  |
| 5. Number of units at                       | ffected:   |  |  |  |
| 6. Coverage of action                       | n: (select one)  |  |  |  |
| Part of the develop                         |  |  |  |  |
| Total developmen                            | t  |  |  |  |
| 1. ☐ Yes ⊠ No:                              | Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. <b>High performing PHAs</b> may skip to component 12.) |  |  |  |
| 2. Program Description                      | on:  |  |  |  |
| <del></del>                                 | Will the PHA limit the number of families participating in the section 8 homeownership option?   |  |  |  |
| number of part  25 or fe  26 - 50  51 to 10 | to the question above was yes, which statement best describes the cicipants? (select one) ewer participants participants 00 participants nan 100 participants  |  |  |  |

# B. Services and programs offered to residents and participants

## (1) General

| a. Self  | F-Sufficiency Policies  |  |  |  |  |
|--|---|--|--|--|--|
| Which if any, of the following discretionary policies will the PHA employ to |   |  |  |  |  |
| enhance the economic and social self-sufficiency of assisted families in the |   |  |  |  |  |
| following areas? (select all that apply)                                     |   |  |  |  |  |
| $\boxtimes$  | Public housing rent determination policies  |  |  |  |  |
|  | Public housing admissions policies  |  |  |  |  |
|  | Section 8 admissions policies   |  |  |  |  |
|  | Preference in admission to section 8 for certain public housing families Preferences for families working or engaging in training or education  |  |  |  |  |
|  | programs for non-housing programs operated or coordinated by the  |  |  |  |  |
|  | PHA Preference/eligibility for public housing homeownership option participation  |  |  |  |  |
|  | Preference/eligibility for section 8 homeownership option participation   |  |  |  |  |
| $\square$  | Other policies (list below)   |  |  |  |  |
|  | 1 /   |  |  |  |  |
|  | Section 8 Certifiate FSS Program  |  |  |  |  |
| b. Eco   | onomic and Social self-sufficiency programs   |  |  |  |  |
| XY6  | Programs to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self-Sufficiency Programs. The position of the table may be altered to facilitate its use.) |  |  |  |  |

| Services and Programs   |                        |   |  |  |
|---|------------------------|---|--|--|
| Program Name & Description (including location, if appropriate) | Estimated<br>Size      | Allocation Method (waiting list/random selection/specific criteria/other) | Access<br>(development office /<br>PHA main office /<br>other provider name) | Eligibility (public housing or section 8 participants or both) |
| Section 8 Certificate FSS                                       | 25 Section<br>8 Certs. | Open to any<br>Section 8<br>certificate holder                            | Main Office  | Section 8<br>Certificate holders                               |
|   |                        |   |  |  |

|  | + +   |                               |  |  |
|--|---|-------------------------------|--|--|
|  |   |                               |  |  |
|  |   |                               |  |  |
|  |   |                               |  |  |
| (2) Family Self Sufficiency participation Description  | orogram/s   |                               |  |  |
|  |   | •                             |  |  |
|  | nily Self Sufficiency (FSS) Participal Required Number of Participants                    | Actual Number of Participants |  |  |
| Program  | (start of FY 2000 Estimate)   | (As of: D/MM/YY)              |  |  |
| Public Housing   | (**************************************   | (                             |  |  |
| Section 8 Certificates   | 25  | 2 as of 08/01/2000            |  |  |
| required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?  If no, list steps the PHA will take below:  Because Clay County HRA's FSS Program is strictly certificate based, we expect to discontinue the program when all our certificates are switched over to vouchers.  C. Welfare Benefit Reductions  1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply) |   |                               |  |  |
| Adopting appropriate policies and train staff  | changes to the PHA's public h f to carry out those policies f new policy on admission and | ousing rent determination     |  |  |
|  | idents of new policy at times in  |                               |  |  |
|  | ng a cooperative agreement wi<br>e exchange of information and                            |                               |  |  |
|  | ol for exchange of information  |                               |  |  |
| Other: (list below)  |   |                               |  |  |
|  |   |                               |  |  |

# D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

Because Clay County HRA is a "small agency" with only 24 Scattered Site public Housing units located in three different communities, we believe we are exempt from the Community Service requirement.

#### 13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to subcomponent D.

#### A. Need for measures to ensure the safety of public housing residents

| scribe the need for measures to ensure the safety of public housing residents   |
|---|
| ect all that apply)   |
| High incidence of violent and/or drug-related crime in some or all of the PHA's developments  |
| High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments                                    |
| Residents fearful for their safety and/or the safety of their children  |
| Observed lower-level crime, vandalism and/or graffiti   |
| People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime     |
| Other (describe below)  |
| Clay County HRA's 24 Scattered Site units have very little crime.   |
| Consequently we have very little need to take measures to ensure resident safety. We have determined this from the items we have checked in 2. below. |
| nat information or data did the PHA used to determine the need for PHA actions improve safety of residents (select all that apply).                   |
| Safety and security survey of residents   |
| Analysis of crime statistics over time for crimes committed "in and around" public housing authority  |
| Analysis of cost trends over time for repair of vandalism and removal of graffiti Resident reports  |
| PHA employee reports  |
| Police reports  |
| Demonstrable, quantifiable success with previous or ongoing anticrime/anti  |
| drug programs   |
| Other (describe below)  |
|   |

CCHRA's Scattered Site Public Housing has very little crime. 16 of our 24 scattered site rental units are situated in communities with less than 1,000 population. Crime has not been a problem in any of our locations and our tenants have not voiced any concerns for safety in our rentals.

3. Which developments are most affected? (list below)

# B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year

| 1. List the crime prevention activities the PHA has undertaken or plans to undertake:  |
|--|
| (select all that apply)  |
| Contracting with outside and/or resident organizations for the provision of  |
| crime- and/or drug-prevention activities   |
| Crime prevention through environmental design  |
| Activities targeted to at-risk youth, adults, or seniors   |
| Volunteer Resident Patrol/Block Watchers Program   |
| Other (describe below)   |
| 2. Which developments are most affected? (list below)  |
| C. Coordination between PHA and the police   |
| 1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply) |
| Police involvement in development, implementation, and/or ongoing  |
| evaluation of drug-elimination plan  |
| Police provide crime data to housing authority staff for analysis and action Police have established a physical presence on housing authority property (e.g.,        |
| community policing office, officer in residence)   |
| Police regularly testify in and otherwise support eviction cases   |
| Police regularly meet with the PHA management and residents  |
| Agreement between PHA and local law enforcement agency for provision of  |
| above-baseline law enforcement services  |
| Other activities (list below)  |
| 2. Which developments are most affected? (list below)  |
|  |

#### D. Additional information as required by PHDEP/PHDEP Plan

| PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.   |
|---|
| <ul> <li>Yes ⋈ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?</li> <li>Yes ⋈ No: Has the PHA included the PHDEP Plan for FY 2001 in this PHA Plan?</li> </ul> |
| Yes No: This PHDEP Plan is an Attachment. (Attachment Filename:)  |
| 14. RESERVED FOR PET POLICY   |
| [24 CFR Part 903.7 9 (n)]   |
| CCHRA has adopted a "Pet Policy". It is included in the Scattered Site Public Housing ACOP document and is available for review at our offices.   |
| 15. Civil Rights Certifications [24 CFR Part 903.7 9 (o)]   |
| Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.   |
| 16. Fiscal Audit [24 CFR Part 903.7 9 (p)]  |
| 1. Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U S.C. 1437c(h))? (If no, skip to component 17.)  |
| 2. Yes No: Was the most recent fiscal audit submitted to HUD?   |
| 3. Yes No: Were there any findings as the result of that audit?   |
| 4. Yes No: If there were any findings, do any remain unresolved?  If yes, how many unresolved findings remain?  |
| 5. Yes No: Have responses to any unresolved findings been submitted to HUD?   |
| If not, when are they due (state below)?  |
| 48 DIVA A 438   |
| 17. PHA Asset Management [24 CFR Part 903.7 9 (q)]  |
| Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.                                      |
| 1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating,                |

2. What types of asset management activities will the PHA undertake? (select all that apply) Not applicable Private management Development-based accounting Comprehensive stock assessment Other: (list below) 3. Yes No: Has the PHA included descriptions of asset management activities in the**optional** Public Housing Asset Management Table? 18. Other Information [24 CFR Part 903.7 9 (r)] A. Resident Advisory Board Recommendations 1. \(\sum \) Yes \(\sum \) No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s? 2. If yes, the comments are: (if comments were received, the PHA **MUST** select one) Attached at Attachment (File name) Provided below: 3. In what manner did the PHA address those comments? (select all that apply) Considered comments but determined that no changes to the PHA Plan were necessary. The PHA changed portions of the PHA Plan in response to comments List changes below: Other: (list below) B. Description of Election process for Residents on the PHA Board 1.  $\square$  Yes  $\bowtie$  No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.) 2.  $\square$  Yes  $\boxtimes$  No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to subcomponent C.)

Plan?

capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA

| 3. Description of Resident Election Process  |  |  |  |  |  |
|--|--|--|--|--|--|
| <ul> <li>a. Nomination of candidates for place on the ballot: (select all that apply)</li> <li>Candidates were nominated by resident and assisted family organizations</li> <li>Candidates could be nominated by any adult recipient of PHA assistance</li> <li>Self-nomination: Candidates registered with the PHA and requested a place on ballot</li> <li>Other: (describe)</li> </ul>  |  |  |  |  |  |
| All 24 Public Housing tenants and 300+ Section 8 participants were sent a letter asking if they would consider being appointed to the HRA Board by the Clay County Board of County Commissioners. Three responded. The Housing Authority Board recommended one name to the Clay County Board of County Commissioners for appointment and that person was appointed. The appointee is a Section 8 participant.  |  |  |  |  |  |
| <ul> <li>b. Eligible candidates: (select one)</li> <li>Any recipient of PHA assistance</li> <li>Any head of household receiving PHA assistance</li> <li>Any adult recipient of PHA assistance</li> <li>Any adult member of a resident or assisted family organization</li> <li>Other (list)</li> </ul>   |  |  |  |  |  |
| <ul> <li>c. Eligible voters: (select all that apply)</li> <li>All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)</li> <li>Representatives of all PHA resident and assisted family organizations</li> <li>Other (list)</li> </ul>  |  |  |  |  |  |
| Because all our PHA tenants either live in a scattered site housing unit or are a Section 8 participant, we do not have a vote. Each tenant or client may nominate him or herself. Minnesota law requires that the Board of County Commissioners appoint persons to the HRA Board. We forward the self-nominated persons to the County Commissioners with a recommendation from the HRA Board, and the County Commissioners make the determination and appointment of the tenant representative. |  |  |  |  |  |
| C. Statement of Consistency with the Consolidated Plan For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).  |  |  |  |  |  |
| Consolidated Plan jurisdiction: (provide name here)  City of Moorhead, Minnesota and the State of Minnesota CHAS   |  |  |  |  |  |

| 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with   |
|--|
| the Consolidated Plan for the jurisdiction: (select all that apply)  |
| <ul> <li>The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.</li> <li>The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.</li> <li>The PHA has consulted with the Consolidated Plan agency during the</li> </ul> |
| development of this PHA Plan.  Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)  |
| Other: (list below)  |
| 4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)  |
| Letter of Consistency from the City of Moorhead<br>Letter of Consistency from the Minnesota Housing Finance Agency   |
| D. Other Information Required by HUD   |
| Use this section to provide any additional information requested by HUD.   |
|  |

#### **Attachments**

#### **Admissions Policy for Deconcentration**

Clay County HRA has no admissions policy for deconcentration. The reason for this is that 100% of our public housing units are scattered site duplex houses. These houses are located in a number of neighborhoods in 3 different communities. We believe that this arrangement is already "deconcentrated" to the point where it would be a meaningless exercise to create a "deconcentration policy".

#### 2001 Capital Fund

Clay County HRA expects to continue to receive Capital Fund allocations from the Treasury for its Scattered Site Housing Program. We will use these funds to supplement our Operating (1406) account.

#### **Community Service Requirement**

Clay County HRA has 24 families living in three different communities in its Scattered Site Public Housing Program. Because of the small size and scattered nature of the rentals, we are claiming an exemption from this requirement. We have 100% of our tenants already working or holding an exemption from the TANF agency because of the age of their children. We do not feel that it would be cost effective to establish a community service program unit there is a need for one.

#### **Pet Policy**

Clay County HRA has established a Pet Policy for our Scattered Site tenants. It has been in effect since 1999. It is included in our Admissions & Continued Occupancy Policy and is available for review in our offices. Each new tenant receives a copy of the policy included in our "Tenant Handbook" when sign our lease.

#### **Progress Towards Five Year Goals**

During 2000, Clay County HRA has increased the number of Section 8 Rental Vouchers available to low-income families by applying for and receiving 25 additional vouchers.

Clay County HRA has reduced its vacancy rate in public housing from 16 unit months of vacancies during 1999 to 6 unit months of vacancies during 2000.

Clay County HRA and the local TANF Agency have signed a Cooperative Agreement that confirms the fact that the two agencies will work together to assisted client families work toward self-sufficiency and reduced public assistance.

#### Resident/Client Member of the Clay County HRA Board

The current Resident/Client Member of the HRA Board is Ms. Karen Vlam of Moorhead, Minnesota. Ms. Vlam is a Section 8 Rent Assistance Client.

#### Membership on the Resident Advisory Committee

The current Resident Advisory Committee member is Ms. Elizabeth Augustine of Dilworth Minnesota. Ms. Augustine is a public housing tenant and has served on the development of the 5-Year Comprehensive Plan in 1999 and the 1<sup>st</sup> year up-date of the plan during 2000.

Use this section to provide any additional attachments referenced in the Plans.

# PHA Plan Table Library

# Component 7 Capital Fund Program Annual Statement Parts I, II, and II

Annual Statement Capital Fund Program (CFP) Part I: Summary

| Capital Fund Grant Number | FFY of Grant Approval: (MM/YYYY) |
|---------------------------|----------------------------------|
| Original Annual Statement |                                  |

| Line No. | Summary by Development Account                      | Total Estimated Cost |  |  |
|----------|---|----------------------|--|--|
| 1        | Total Non-CGP Funds                                 |                      |  |  |
| 2        | 1406 Operations                                     |                      |  |  |
| 3        | 1408 Management Improvements                        |                      |  |  |
| 4        | 1410 Administration                                 |                      |  |  |
| 5        | 1411 Audit  |                      |  |  |
| 6        | 1415 Liquidated Damages                             |                      |  |  |
| 7        | 1430 Fees and Costs                                 |                      |  |  |
| 8        | 1440 Site Acquisition                               |                      |  |  |
| 9        | 1450 Site Improvement                               |                      |  |  |
| 10       | 1460 Dwelling Structures                            |                      |  |  |
| 11       | 1465.1 Dwelling Equipment-Nonexpendable             |                      |  |  |
| 12       | 1470 Nondwelling Structures                         |                      |  |  |
| 13       | 1475 Nondwelling Equipment                          |                      |  |  |
| 14       | 1485 Demolition                                     |                      |  |  |
| 15       | 1490 Replacement Reserve                            |                      |  |  |
| 16       | 1492 Moving to Work Demonstration                   |                      |  |  |
| 17       | 1495.1 Relocation Costs                             |                      |  |  |
| 18       | 1498 Mod Used for Development                       |                      |  |  |
| 19       | 1502 Contingency                                    |                      |  |  |
| 20       | Amount of Annual Grant (Sum of lines 2-19)          |                      |  |  |
| 21       | Amount of line 20 Related to LBP Activities         |                      |  |  |
| 22       | Amount of line 20 Related to Section 504 Compliance |                      |  |  |
| 23       | Amount of line 20 Related to Security               |                      |  |  |
| 24       | Amount of line 20 Related to Energy Conservation    |                      |  |  |
|          | Measures  |                      |  |  |

# **Optional Table for 5-Year Action Plan for Capital Fund (Component 7)**

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

|   | Optional 5-Year Action                     | n Plan Tables             |                            |                   |  |
|---|--|---------------------------|----------------------------|-------------------|--|
| Development<br>Number   | Development Name<br>(or indicate PHA wide) | Number<br>Vacant<br>Units | % Vacancies in Development |                   |  |
| Description of Needed Physical Improvements or Managemen Improvements |  | Management                |                            | Estimated<br>Cost | Planned Start Date<br>(HA Fiscal Year) |
| Total estimated co  | ost over next 5 years                      |                           |                            |                   |  |

# **Optional Public Housing Asset Management Table**

See Technical Guidance for instructions on the use of this table, including information to be provided.

| Public Housing Asset Management |  |                                     |  |                                |                          |  |
|---------------------------------|--|-------------------------------------|--|--------------------------------|--------------------------|--|
| pment                           | Activity Description                               |                                     |  |                                |                          |  |
| ication                         |  |                                     |  |                                |                          |  |
| Number and<br>Type of units     | Capital Fund Program Parts II and III Component 7a | Development Activities Component 7b | Demolition /<br>disposition<br>Component 8 | Designated housing Component 9 | Conversion  Component 10 | Home-<br>ownership<br>Component<br>11a |
|                                 |  |                                     |  |                                |                          |  |
|                                 |  |                                     |  |                                |                          |  |
|                                 |  |                                     |  |                                |                          |  |
|                                 |  |                                     |  |                                |                          |  |
|                                 |  |                                     |  |                                |                          |  |
|                                 |  |                                     |  |                                |                          |  |
|                                 |  |                                     |  |                                |                          |  |
|                                 |  |                                     |  |                                |                          |  |
|                                 |  |                                     | _  |                                |                          |  |
|                                 |  |                                     |  |                                |                          |  |
|                                 |  |                                     |  |                                |                          |  |